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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

*PCAK*  
*IFW*

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,240.00

### Complete if Known

Application Number	09/757,645-Conf. #8027
Filing Date	January 11, 2001
First Named Inventor	Satoaki NAKAGAWA
Examiner Name	H. T. Nguyen
Art Unit	2621
Attorney Docket No.	0925-0165P

### METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☐ Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

### FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 14 - 20 =        x        =       

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 4 - 4 =        x        =       

HP = highest number of independent claims paid for, if greater than 3.

#### Multiple Dependent Claims

Fee (\$) Fee Paid (\$)

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets        Extra Sheets        Number of each additional 50 or fraction thereof        Fee (\$)        Fee Paid (\$)       

- 100 =        /50        (round up to a whole number) x        =       

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...)	790.00
1.52 Extension for response within second month	450.00

SUBMITTED BY	
Signature <u>[Signature]</u>	Registration No. (Attorney/Agent) <u>29,680</u>
Name (Print/Type) <u>Michael K. Mutter</u>	Telephone <u>(703) 205-8000</u>
	Date <u>July 17, 2006</u>



<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 0925-0165P	
Application No. 09/757,645-Conf. #8027		Filing Date January 11, 2001		Examiner H. T. Nguyen	
Art Unit 2621					
Applicant(s): Satoaki NAKAGAWA et al.					
Invention: SIGNAL RECEIVER					
<b>MS RCE</b> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	14	- 20 =		x	
<b>Independent Claims</b>	4	- 4 =		x	
<b>Multiple Dependent Claims (check if applicable)</b> <input type="checkbox"/>					
<b>Other fee (please specify):</b> Request for continued examination (RCE) (see 37 CFR 1.114); Extension for response within second month					1,240.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					1,240.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ <u>1,240.00</u> is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
Michael K. Mutter Attorney Reg. No.: 29,680				Dated: <u>July 17, 2006</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					